

## STATE OF ARKANSAS SECURITIES DEPARTMENT HERITAGE WEST BUILDING, SUITE 300 201 EAST MARKHAM STREET LITTLE ROCK, AR 72201



TELEPHONE: 501.324.9260 FAX: 501.324.9268 INTERNET: www.state.ar.us/arsec

## FMLA Form LO-002

## LOAN OFFICER NOTICE OF CHANGE

NOTE: PLEASE SUBMIT ORIGINAL FORMS ONLY; THE DEPARTMENT WILL NOT ACCEPT FAXED COPIES. PLEASE RETAIN A COPY FOR YOUR RECORDS. INCOMPLETE FORMS WILL BE RETURNED FOR COMPLETION.

1.	AR Lo	an Officer License Numbe	r:			
2.	Name (	(Give full legal name):	Mr. Ms. Mrs.	Last	First	Middle
	SSN:	Date o	f Birth:	Drivers Li	cense No.:	State:
3.	Check	box(es) below to indicate to Name Change (New legal (Attach court document, if appoint New Home Address: (Physical Address)	l name.)	ange(s) and give complete in Last	information for each First	box checked:  Middle
		New Mailing Address: (If different)				
		New Home Telephone N	umber:			
		New Home Fax Number:				

New Home E-mail Address
New Home E-man Address
New Business Address (Physical Address)
New Mailing Address (If different)
New Business Telephone Number
New Business Fax Number
New Business E-mail Address
I am no longer employed as a Loan Officer by the Licensed Mortgage Banker/Mortgage Broker listed below ( <i>License attached</i> ):
Former Employer
Employer's AR License Number
Effective Date
I am now employed as a Loan Officer by the Licensed Mortgage Banker/Mortgage Broker listed below (\$50.00 fee attached):
New Employer
Employer's AR License Number
Effective Date

STATE OF)						
COUNTY OF)						
Under the penalties of perjury, I certify that this a complete.	application, and any accompanying information, is true, correct and					
I will comply with the provisions of Ark. Code Ann. § 23-39-501, <i>et seq.</i> , (Fair Mortgage Lending Act). I understand that non-compliance may result in a suspension or revocation of my Loan Officer license.						
I understand that I may be employed by only one Mortgage Banker or Broker at a time. I further understand that, if licensed, my license is terminated when I change employment and I must apply for a new license if employed by another Licensed Mortgage Banker or Broker.						
(Signature)						
(Print Name)	Title					
Subscribed and sworn to before me this da	ay of					
	NOTARY PUBLIC					
My Commission Expires:						

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